

Amendment No. \_\_\_\_\_

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Signature of Sponsor

**FILED**

Date \_\_\_\_\_

Time \_\_\_\_\_

Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

**AMEND Senate Bill No. 1111\***

**House Bill No. 1380**

by deleting all language after the enacting clause and substituting:

SECTION 1. This act is known and may be cited as the "Mature Minor Doctrine Clarification Act."

SECTION 2. Tennessee Code Annotated, Title 63, Chapter 1, Part 1, is amended by adding the following as a new section:

(a) The general assembly finds and declares the following:

(1) The National Childhood Vaccine Injury Act of 1986 (42 U.S.C. § 300aa-26) requires, prior to the administration of a vaccine listed in the vaccine injury table to a minor, that healthcare providers provide the vaccine information statement from the centers for disease control and prevention to the legal representatives of the minor;

(2) The Tennessee supreme court's decision in *Cardwell v. Bechtol*, 724 S.W.2d 739 (1987), found that the mature minor exception, guided by the "Rule of Sevens," is part of Tennessee common law, but only in the context of tort law and jury considerations, and not the general rule requiring parental consent for the medical treatment of minors;

(3) The *Cardwell* court stated, "Adoption of the mature minor exception to the common law rule is by no means a general license to treat minors without parental consent and its application is dependent on the facts of each case. It must be seen in the context of the tort in question.";

(4) Despite its holding in the case, the *Cardwell* court declined to alter



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the general rule, which is "requiring parental consent for the medical treatment of minors";

(5) In its opinion in the case of *Parham v. J.R.*, 442 U.S. 584 (1979), the United States supreme court wrote, "Simply because the decision of a parent is not agreeable to a child, or because it involves risks, does not automatically transfer the power to make that decision from the parents to some agency or officer of the state. The same characterizations can be made for a tonsillectomy, appendectomy, or other medical procedure. Most children, even in adolescence, simply are not able to make sound judgments concerning many decisions, including their need for medical care or treatment. Parents can and must make those judgments."; and

(6) In the case of *Troxel v. Granville*, 530 U.S. 57 (2000), Justice O'Connor wrote for the United States supreme court, "The Fourteenth Amendment's Due Process Clause has a substantive component that 'provides heightened protection against government interference with certain fundamental rights and liberty interests,' *Washington v. Glucksberg*, 521 U.S. 702, 720, including parents' fundamental right to make decisions concerning the care, custody, and control of their children".

(b) As used in this section:

(1) "Department" means the department of health;

(2) "Healthcare provider" means a healthcare professional, healthcare establishment, or healthcare facility licensed, registered, certified, or permitted pursuant to this title or title 68 or regulated under the authority of either the department of health or an agency, board, council, or committee attached to the department of health, and that is authorized to administer vaccinations in this state;

(3) "Minor":

(A) Means an individual who has not attained eighteen (18) years of age; and

(B) Does not include an individual who:

(i) Is emancipated pursuant to title 29, chapter 31;

(ii) Is in need of emergency treatment pursuant to § 63-6-222;

(iii) Is or was previously a member of the armed forces of the United States, or a member of a reserve or national guard unit; or

(iv) Is the parent of a minor child and has full custody of that minor child;

(4) "Vaccination" means the act of introducing a vaccine into the body; and

(5) "Vaccine" means a substance intended for use in humans to stimulate the body's immune response against an infectious disease or pathogen.

(c)

(1) A healthcare provider shall not provide a vaccination to a minor unless the healthcare provider first receives informed consent from a parent or legal guardian of the minor. The healthcare provider shall document receipt of, and include in the minor's medical record proof of, such prior parental or guardian informed consent.

(2) An employee or agent of this state shall not provide, request, or facilitate the vaccination of a minor child who is in the custody of this state, except:

(A) Upon written request to, and court order from, the appropriate court;

(B) If a parent or legal guardian of the minor has provided prior written informed consent to the vaccination; or

(C) If the parental rights of each of the minor's parents or legal guardians have been terminated by a court, and all opportunities for appeal have been exhausted.

(3) A violation of this section is an unlawful practice and is grounds for the offending healthcare provider's licensing authority to suspend, revoke, or refuse to renew the healthcare provider's license or take other disciplinary action allowed by law.

(4) If the licensing authority of a healthcare provider receives information of a violation or potential violation of this section by the healthcare provider, then the licensing authority shall conduct an immediate investigation and take appropriate disciplinary action.

(d) To the extent this section conflicts with another law, this section controls.

SECTION 3. Tennessee Code Annotated, Section 14-4-103, is amended by deleting the section and substituting:

A healthcare provider shall not provide a patient who is a minor with a COVID-19 vaccine without first obtaining written consent from the minor patient's parent or legal guardian.

SECTION 4. If a provision of this act or its application to any person or circumstance is held invalid, then the invalidity does not affect other provisions or applications of the act that can be given effect without the invalid provision or application, and to that end, the provisions of this act are severable.

SECTION 5. The department of health is authorized to promulgate rules to effectuate this act. The rules must be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in Tennessee Code Annotated, Title 4, Chapter 5.

SECTION 6. This act takes effect upon becoming a law, the public welfare requiring it.

Amendment No. \_\_\_\_\_

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Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

**AMEND Senate Bill No. 394\***

**House Bill No. 738**

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Title 63, is amended by adding the following as a new chapter:

**63-15-101. Legislative findings and intent.**

(a) The general assembly finds that:

(1) Pregnant and postpartum women who receive doula care are found to have improved health outcomes for themselves and their infants, including higher breastfeeding initiation rates, fewer low birth weight babies, and lower rates of cesarean deliveries;

(2) The benefits of doula care can have a financial impact in helping families and this state avoid the costs associated with low birth weight babies, cesarean births, and other pregnancy-related complications; and

(3) A successful program of medicaid coverage for doula care must honor and support the autonomy of doulas, and be as inclusive as possible of the wide variety of birth support work that exists, including community-based and traditional birth support work.

(b) It is the intent of the general assembly to identify and mobilize an educated and prepared doula workforce to serve pregnant women in this state by supporting the ongoing practices of doulas working with communities that experience the highest burden of birth disparities, but without the barriers to entry that licensure would entail.

**63-15-102. Chapter definitions.**



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As used in this chapter:

- (1) "Committee" means the doula services advisory committee;
- (2) "Community-based doula" means a doula who serves pregnant women in a community in this state with a high rate of maternal or infant mortality and morbidity, and whose services are tailored to the specific needs of that community;
- (3) "Department" means the department of health;
- (4) "Doula" means a birth worker who provides child birth education, advocacy, and physical, emotional, and nonmedical support for pregnant and postpartum women before, during, and after childbirth and loss;
- (5) "Doula services" means at least three (3) prenatal appointments, continuous labor support during birth, and at least three (3) postpartum appointments with a pregnant woman; and
- (6) "Postpartum" means the twelve-month period immediately following childbirth.

**63-15-103. Doula services advisory committee – Creation – Purpose – Duties.**

- (a) There is created the doula services advisory committee. The committee is attached to the department of health for administrative purposes.
- (b) The purpose of the committee is to:
  - (1) Advise the department of health by establishing core competencies and standards for the provision of doula services in this state; and
  - (2) Recommend reimbursement rates and fee schedules for TennCare reimbursement for doula services.
- (c) The doula services advisory committee shall:
  - (1) Develop a set of core competencies and standards for doulas providing doula services in this state, for the purpose of verifying competency,

including a demonstration of competency, through training or attestation of equivalency or lived experience, in the following areas:

(A) Understanding basic anatomy and physiology as related to pregnancy, the childbearing process, breastfeeding, and the postpartum period;

(B) Utilizing different strategies to provide emotional support, education, and resources during the perinatal period;

(C) Knowledge of and the ability to assist families with utilizing a wide variety of nonclinical labor coping and physical comfort strategies;

(D) Strategies to foster effective communication between clients, clients' families, support services, and healthcare providers; and

(E) Knowledge of community-based, government-funded, and clinical resources available to the client for needs outside the doula's scope of practice;

(2) Propose multiple options for medicaid reimbursement for doula services, including doulas operating as independent providers and doulas working with licensed providers;

(3) Propose reimbursement rates and fee schedules reflecting the reasonable number of clients a doula can sustain at the same time;

(4) Propose incentive-based programs such as fee waivers to encourage participation from doulas in rural communities; and

(5) Examine outcomes, findings, and reports from existing pilot programs related to the provision of doula services.

(d) The doula services advisory committee shall compile a report of its findings and recommendations from the duties described in subsection (c). No later than eighteen (18) months following the date of the committee's first meeting, the department of health shall publish a copy of the committee's report on its public website, and the

committee shall transmit a copy of the report to the chair of the health and welfare committee of the senate, the chair of the health committee of the house of representatives, and the legislative librarian.

**63-15-104. Membership – Appointment – Terms.**

(a) The committee consists of the following five (5) members:

(1) The commissioner of health, or the commissioner's designee with experience in maternal health or medicaid policy;

(2) The director of TennCare, or the director's designee;

(3) Two (2) community-based doulas, to be appointed by the commissioner of health or the commissioner's designee, who have documented experience providing services to:

(A) Medicaid recipients; or

(B) Women in municipalities or unincorporated areas in this state with high rates of maternal and infant mortality; and

(4) One (1) doula, to be appointed by the commissioner of health or the commissioner's designee, who has documented experience providing services to medicaid recipients.

(b) If a membership position on the committee becomes vacant, then the commissioner shall appoint a replacement member who meets the qualifications as described in subsection (a) for the vacant position.

(c)

(1) The commissioner shall remove any member who misses more than fifty percent (50%) of the scheduled meetings in a calendar year and appoint a new member to serve.

(2) Notwithstanding subdivision (c)(1), the commissioner may excuse an absence of a committee member for good cause, in the discretion of the commissioner.

(d) The chair shall convene the first meeting of the committee no later than October 1, 2023, and elect a committee member to serve as chair and conduct the committee meetings.

(e) All reimbursement for travel expenses must be in accordance with the comprehensive travel regulations as promulgated by the department of finance and administration and approved by the attorney general and reporter. Members of the advisory committee serve without compensation, but are entitled to receive necessary travel and other appropriate expenses while engaged in committee business.

(f) The committee ceases to exist on July 1, 2026.

SECTION 2. Tennessee Code Annotated, Section 4-29-246(a), is amended by inserting the following as a new subdivision:

( ) Doula services advisory committee, created by § 63-15-103;

SECTION 3. The department of health is authorized to promulgate rules to effectuate this act. The rules must be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in Tennessee Code Annotated, Title 4, Chapter 5.

SECTION 4. The headings in this act are for reference purposes only and do not constitute a part of the law enacted by this act. However, the Tennessee Code Commission is requested to include the headings in any compilation or publication containing this act.

SECTION 5. This act takes effect July 1, 2023, the public welfare requiring it.

Amendment No. \_\_\_\_\_

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Signature of Sponsor

**FILED**

Date \_\_\_\_\_

Time \_\_\_\_\_

Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

**AMEND Senate Bill No. 1313**

**House Bill No. 647\***

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Section 63-2-102, is amended by deleting subsection (a) and substituting:

(a)

(1) The party requesting the patient's records is responsible to the provider for the reasonable costs of copying and mailing the patient's records. Such reasonable costs must not exceed twenty dollars (\$20.00) for paper copies of medical records five (5) pages or less in length and fifty cents (50¢) per page for each page copied after the first five (5) pages and the actual cost of mailing.

(2) For records other than those involving workers' compensation cases:

(A) The reasonable costs must not exceed the cost of the following, as described in 45 CFR 164.524(c)(4):

(i) Labor for copying the protected health information requested by the individual;

(ii) Supplies for creating the paper copy, or electronic media, if the individual requests that the electronic copy be provided on portable media; and

(iii) Postage, when the individual has requested the copy, or the summary or explanation, be mailed; and



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(B) The total charges for electronic medical records provided via portable media, electronic mail, medical record portal, or fax must comply with the following:

(i) The total charges must be no more than twenty dollars (\$20.00) for records ten (10) pages or less in length;

(ii) The total charges must be no more than twenty-five cents (25¢) per page for each page after the first ten (10) pages, up to eighty dollars (\$80.00); and

(iii) Charges for copying paper records or faxing paper records are subject to the limits set in subdivision (a)(1).

(3) Upon request, a person providing records pursuant to § 63-2-101 shall provide the records in electronic form unless the records are not kept in electronic form in the usual course of business.

(4) A third-party provider of record copying and related services is subject to the reasonable cost limits contained in this section and shall not impose a charge or fee for such services in excess of the cost limits.

(5) The costs charged for reproducing records of patients involved in a workers' compensation claim must be as specified in § 50-6-204.

(6) A healthcare provider shall not charge a fee for copying or notarizing a medical record when requested by the department pursuant to a complaint, inspection, or survey as set forth in § 63-1-117.

(7) In social security disability cases, if a patient, a patient's legal representative, or a person authorized by the patient requests copies of the patient's electronic medical records provided via portable media, electronic mail, medical record portal, or fax under this section for use in appealing a denial of social security disability insurance under 42 U.S.C. § 401-433, or supplemental security income under 42 U.S.C. § 1381-1385, then:

(A) The healthcare provider or third-party provider of record, or both, copying and providing related services shall charge the patient, the patient's legal representative, or the person authorized by the patient the reimbursement amount that disability determination services reimburses the provider for copies of such records pursuant to federal social security administration medical record payment rates; and

(B) A search fee must not be charged if medical records are not located in response to the request.

SECTION 2. This act takes effect July 1, 2023, the public welfare requiring it.

Amendment No. \_\_\_\_\_

\_\_\_\_\_  
Signature of Sponsor

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Time \_\_\_\_\_

Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

**AMEND Senate Bill No. 219**

**House Bill No. 271\***

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Section 63-11-104(h), is amended by deleting the language "and certified psychological assistants" and substituting ", certified psychological assistants, and certified psychological testing technicians".

SECTION 2. Tennessee Code Annotated, Section 63-11-201(a), is amended by deleting the language "Four (4) levels" and substituting "Five (5) levels", and by adding the following as a new subdivision:

(5) Certified psychological testing technician;

SECTION 3. Tennessee Code Annotated, Section 63-11-201(c), is amended by deleting the language "certified psychological assistant must" and substituting "certified psychological assistant or certified psychological testing technician must".

SECTION 4. Tennessee Code Annotated, Section 63-11-204(b), is amended by deleting the language "psychologist, or psychological examiner or senior psychological examiner or certified psychological assistant" and substituting "psychologist, psychological examiner, senior psychological examiner, certified psychological assistant, or certified psychological testing technician".

SECTION 5. Tennessee Code Annotated, Section 63-11-204(c), is amended by deleting the language "psychologist or, psychological examiner or senior psychological examiner or certified psychological assistant" and substituting "psychologist, psychological examiner, senior psychological examiner, certified psychological assistant, or certified psychological testing technician".



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SECTION 6. Tennessee Code Annotated, Section 63-11-205(a)(1), is amended by deleting the language "psychologists or, psychological examiners or, senior psychological examiners or certified psychological assistants" and substituting "psychologists, psychological examiners, senior psychological examiners, certified psychological assistants, or certified psychological testing technicians".

SECTION 7. Tennessee Code Annotated, Section 63-11-205(d), is amended by deleting the language "psychological examiner or, senior psychological examiner or, certified psychological assistant or psychologist" and substituting "psychological examiner, senior psychological examiner, certified psychological assistant, certified psychological testing technician, or psychologist".

SECTION 8. Tennessee Code Annotated, Section 63-11-206(a), is amended by deleting the language "license to practice as psychological examiner or, psychologist or senior psychological examiner or a certificate to practice as a psychological assistant" and substituting "license to practice as a psychological examiner, psychologist, or senior psychological examiner, or a valid certificate to practice as a psychological assistant or psychological testing technician,".

SECTION 9. Tennessee Code Annotated, Section 63-11-206(b), is amended by deleting the subsection and substituting:

(b) This chapter does not prevent members of other recognized professions that are licensed, certified, or regulated under the laws of this state from rendering services consistent with their professional training and code of ethics as long as they do not represent themselves to be psychologists, psychological examiners, senior psychological examiners, certified psychological assistants, or certified psychological testing technicians. Duly recognized members of the clergy are not restricted from functioning in their ministerial capacity as long as they do not represent themselves to be psychologists, psychological examiners, senior psychological examiners, certified psychological assistants, or certified psychological testing technicians.

SECTION 10. Tennessee Code Annotated, Section 63-11-206(c)(1), is amended by deleting the language "psychological examiner or, psychologist or, senior psychological examiner or certified psychological assistant" and substituting "psychological examiner, psychologist, senior psychological examiner, certified psychological assistant, or certified psychological testing technician".

SECTION 11. Tennessee Code Annotated, Section 63-11-206(c), is amended by adding the following as a new subdivision:

(3) A person practices as a "certified psychological testing technician" within the meaning of this chapter when the person claims to be a certified psychological testing technician or renders to individuals or the public for remuneration any service involving the application of recognized principles, methods, and procedures of the science and profession of psychology and only under the supervision of either the psychologist or senior psychological examiner employing the certified psychological testing technician or the employing community mental health center or state governmental agency. Any and all work performed by a certified psychological testing technician is supervised by a psychologist or senior psychological examiner as determined by the board.

SECTION 12. Tennessee Code Annotated, Section 63-11-206(g), is amended by deleting the language "psychological examiner or as a psychologist, or as a senior psychological examiner or certified psychological assistant" and substituting "psychological examiner, psychologist, senior psychological examiner, certified psychological assistant, or certified psychological testing technician".

SECTION 13. Tennessee Code Annotated, Section 63-11-207, is amended by adding the following as a new subsection:

(c)

(1) A person seeking to practice as a certified psychological testing technician in this state shall, before it is lawful for the person to practice as a certified psychological testing technician, make application to the board, upon

such form and in such manner as is adopted and prescribed by the board, including, but not limited to, the proper registration with the board of the supervisor or supervisors of record for the certified psychological testing technician. Unless the person obtains a proper certificate as issued by the board, it is unlawful for the person to practice. The person violates this chapter if the person practices as a certified psychological testing technician without first having obtained a proper certificate.

(2) As used in subdivision (c)(1), "practice as a certified psychological testing technician" means the individual is duly authorized by the board to administer and score standardized psychological and neuropsychological tests and to observe and describe a client's test behavior and test responses. A certified psychological testing technician shall not select psychological or neuropsychological tests or versions of tests to be given, interpret test results, write test results, or give test feedback to clients.

(3) The services provided by a certified psychological testing technician must be provided under the supervision of a psychologist or senior psychological examiner who is registered with the board as a supervisor of record to provide such supervision for the certified psychological testing technician. The certified psychological testing technician must be employed by, or contracted with, the same work setting as the supervising psychologist or senior psychological examiner who is registered with the board.

(4) A candidate for certification shall furnish the board with satisfactory evidence that the candidate:

(A) Is of good moral character;

(B) Is a citizen of the United States;

(C) Is not considered by the board to be engaged in unethical practice; and

(D) Proof of completion of a bachelor's degree or graduate degree, or proof of current enrollment in a graduate degree program, from a regionally accredited university, college, or professional school, in either psychology or education with a specialization in educational psychology, counseling psychology, or school psychology. The candidate's educational training must consist of a minimum of seventy-two (72) hours of total education and training relating to psychological or neuropsychological test administration and scoring that includes the following:

(i) At least twenty (20) hours of direct observation, including at least ten (10) hours of direct observation of a licensed psychologist or senior psychological examiner administering and scoring tests, and at least ten (10) hours of direct observation of either a licensed psychologist, senior psychological examiner, or certified psychological testing technician duly registered by the board administering and scoring tests;

(ii) At least forty (40) hours of administering and scoring tests in the presence of a licensed psychologist or senior psychological examiner; and

(iii) At least twelve (12) hours of additional education on topics related to best practices for the functions identified in subdivision (c)(2). Of those twelve (12) hours, at least three (3) hours must be specifically dedicated to law and ethics, and at least three (3) hours must be dedicated to multicultural competency. Additional topics must relate to growth, knowledge, and skill-based training that would enhance the candidate's professional skill in providing care for persons with medical,

psychiatric, neurocognitive, and developmental conditions  
commonly assessed by psychologists and neuropsychologists.

(5) The education and training specified in subdivisions (c)(4)(D)(i)-(iii)  
may be obtained through any combination of the following:

(A) Participating in individual or group instruction by a licensed  
psychologist or senior psychological examiner;

(B) Engaging in independent learning directed by a licensed  
psychologist or senior psychological examiner;

(C) Completing graduate-level coursework at a regionally  
accredited university, college, or professional school; or

(D) Taking continuing education courses from organizations  
offering continuing education sponsorships.

(6) This chapter does not prevent a person engaged in gaining the  
experience, training, or education required by this subdivision (c)(4)(D) from  
administering and scoring psychological and neuropsychological tests.

SECTION 14. Tennessee Code Annotated, Section 63-11-213, is amended by deleting  
the language "licensed psychologist or psychological examiner or senior psychological examiner  
or certified psychological assistant" and substituting "licensed psychologist, licensed  
psychological examiner, licensed senior psychological examiner, certified psychological  
assistant, or certified psychological testing technician".

SECTION 15. Tennessee Code Annotated, Section 63-11-218(a), is amended by  
deleting the language "licensed psychologist or psychological examiner or senior psychological  
examiner or certified psychological assistant" and substituting "licensed psychologist, licensed  
psychological examiner, licensed senior psychological examiner, certified psychological  
assistant, or certified psychological testing technician".

SECTION 16. The board of examiners in psychology is authorized to promulgate rules  
to effectuate this act. The rules may be promulgated as emergency rules pursuant to

Tennessee Code Annotated, § 4-5-208(a)(5). The rules must be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in Tennessee Code Annotated, Title 4, Chapter 5.

SECTION 17. For the purpose of promulgating rules, this act takes effect upon becoming a law, the public welfare requiring it. For all other purposes, this act takes effect January 1, 2024, the public welfare requiring it.

Amendment No. \_\_\_\_\_

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Signature of Sponsor

**FILED**

Date \_\_\_\_\_

Time \_\_\_\_\_

Clerk \_\_\_\_\_

Comm. Amdt. \_\_\_\_\_

**AMEND Senate Bill No. 866**

**House Bill No. 827\***

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Title 68, Chapter 1, Part 1, is amended by adding the following as a new section:

(a) As used in this section:

(1) "Adolescent beds" means the number of available, staffed psychiatric beds ready for admission to individuals who are less than eighteen (18) years of age;

(2) "Adult beds" means the number of available, staffed psychiatric beds ready for admission to individuals who are between eighteen (18) and sixty (60) years of age;

(3) "Department" means the department of health;

(4) "Geriatric beds" means the number of available, staffed psychiatric beds ready for admission to individuals who are sixty (60) years of age or older;

(5) "Hospital" means a hospital licensed pursuant to this title or title 33 that provides inpatient psychiatric services, and includes a regional mental health institute; and

(6) "Psychiatric bed tracking system" means a web-based electronic system managed by the department that can be searched to locate inpatient psychiatric services at a hospital in this state.

(b) The department shall establish and integrate into the department's

healthcare resource tracking system a psychiatric bed tracking system. The department



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shall ensure that the psychiatric bed tracking system is capable of accepting data from hospitals no later than January 1, 2025.

(c)

(1) Beginning January 1, 2025, a hospital in this state shall participate in the psychiatric bed tracking system established pursuant to subsection (b).

(2) A hospital shall update the psychiatric bed tracking system no less than one (1) time per day.

(3) Each update must include the number of available, staffed adolescent beds; the number of available, staffed adult beds; and the number of available, staffed geriatric beds.

SECTION 2. This act takes effect upon becoming a law, the public welfare requiring it.